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FACSIMILE TRANSMISSION

January 12, 2006

TO : U.S. PATENT AND TRADEMARK OFFICE

**ATTN: Examiner David C. PAYNE
U.S. Serial No. 10/615,978 – filed July 10, 2003
Group Art Unit 2638
Attorney's Docket No. 614.1963D**

FAX NO.: (571) 27 3-8300

TELEPHONE:

FROM: H. J. Staas

**RE: AMENDMENT AND PETITION FOR THREE MONTH
EXTENSION OF TIME**

NO. OF PAGES (Including this Cover Sheet) 12

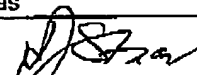
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on 1-12, 2006
STAAS & HALSEY
By: [Signature]
Date 1-12-06

S&H Form: (02/05)

REPLY/AMENDMENT FEE TRANSMITTAL		Attorney Docket No.		614.1963D			
		Application Number		10/615,978			
		Filing Date		July 10, 2003			
		First Named Inventor		Kazuhisa MURATA			
		Group Art Unit		2638			
AMOUNT ENCLOSED		\$1,020.00		Examiner Name		PAYNE, DAVID C	
FEE CALCULATION (fees effective 12/08/04)							
CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Calculations		
TOTAL CLAIMS	12	- 20 =	0	X \$ 50.00 =	\$ 0.00		
INDEPENDENT CLAIMS	12	- 14 =	0	X \$ 200.00 =	0.00		
Since an Official Action set an <u>original</u> due date of <u>October 12, 2005</u> , petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$120)); (2 months (\$450)); (3 months (\$1,020)); (4 months (\$1,590)); (5 months (\$2,160));					\$ 1,020.00		
If Notice of Appeal is enclosed, add (\$500.00)							
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$130.00)							
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)							
Total of above Calculations =					\$ 1,020.00		
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)							
TOTAL FEES DUE =					\$ 1,020.00		
(1) If entry (1) is less than entry (2), entry (3) is "0". (2) If entry (2) is less than 20, change entry (2) to "20". (4) If entry (4) is less than entry (5), entry (8) is "0". (5) If entry (5) is less than 3, change entry (5) to "3".							
METHOD OF PAYMENT							
<input type="checkbox"/> Check enclosed as payment.							
<input checked="" type="checkbox"/> Charge "TOTAL FEES DUE" to the Deposit Account No. below.							
<input type="checkbox"/> No payment is enclosed.							
GENERAL AUTHORIZATION							
<input checked="" type="checkbox"/> If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to: Deposit Account No. <u>19-3935</u> Deposit Account Name <u>STAAS & HALSEY LLP</u>							
<input checked="" type="checkbox"/> The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.							
SUBMITTED BY: STAAS & HALSEY LLP							
Typed Name		H. J. Staas		Reg. No.	22,010		
Signature				Date	January 12, 2006		

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